## Western Illinois University Student Teaching Clinical Experience Evaluation - Summary

Student Teacher:		Major:		WIU ID:	
Cooperating Teacher:		School:			
Date of Evaluation:		Course #:			
Classroom Divers	sity Checklist: Check all tha	t apply.			
One or more	e students qualify for free or r	educed lunch		One or more students have a	disability
Students rep	present at least two ethnic grou	ups, including C	aucasian	Students represent both gender	ers
One or more	e students are English Langua	ge Learners			
	uster Teaching Evaluation: l nt, or 4-Distinguished) in the	•	_	of the student teacher (1-Unsatisfac	etory, 2-
	Cluster 1: Clarity & Accuracy		Cluste	Cluster 4: Intellectual Engagement	
	Cluster 2: Learning Environn		Cluste	Cluster 5: Successful Learning	
	Cluster 3: Classroom Management		Cluster 6: Professionalism		
at a 2-Basic Leve	l or higher on all Clusters. l ease provide an explanation	f you feel the ca	andidate ra	8 weeks), WIU candidates are expeating in any of these areas is below w. If you need more space, please co	the
Cooperating Teach	her Folder.)	ny this form on	your schoo	ol's letterhead. (See sample letter in	
	perating Teacher:				
Signature of Stude	ent Teacher:				